

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER C C00111278	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Carol Tobias		Date MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 34 Melcor De Canoncito		Amount 20.00	
City State Zip Code Cedar Crest NM 87008		Transaction ID: EFB6ED07A1FEB4118D9	
Purpose of Expenditure S2MO00353 Recording,		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: JAMES MATTHES TALENT		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 221583.69		2006	
Full Name (Last, First, Middle, Initial) of Payee Carol Tobias		Date MM / DD / YYYY 11 / 03 / 2006	
Mailing Address 34 Melcor De Canoncito		Amount 8.00	
City State Zip Code Cedar Crest NM 87008		Transaction ID: EA242B0BD82B6429383F	
Purpose of Expenditure H6OH13141 GOTV Recording		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MR. CRAIG FOLTIN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 8945.54		2006	
(a) SUBTOTAL of Itemized Independent Expenditures		28.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Carol Tobias Signature		Date MM / DD / YYYY 12 / 04 / 2009	